

# BEST AVAILABLE COPY

ISSUE SLIP STAPLE AREA (for additional cross references)

POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	<i>gms</i>		<i>06/21/01</i>
O.I.P.E. CLASSIFIER			
FORMALITY REVIEW	<i>LT</i>	<i>50708</i>	<i>8-6-01</i>
RESPONSE FORMALITY REVIEW			

## INDEX OF CLAIMS

<p>✓ ..... Rejected</p> <p>= ..... Allowed</p> <p>- (Through numeral) ... Canceled</p> <p>..... Restricted</p>	<p>N ..... Non-elected</p> <p>I ..... Interference</p> <p>A ..... Appeal</p> <p>O ..... Objected</p>
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If more than 150 claims or 10 actions  
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*330*  
*8/6/01*